

PCT**REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For receiving Office use only

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference
(if desired) (12 characters maximum) 11613.61WOU1**Box No. I TITLE OF INVENTION**

VENOUS FILTERS

Box No. II APPLICANT

This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

Telephone No.

THE GOVERNMENT OF THE UNITED STATES OF AMERICA
as represented by the Secretary, Department of Health and Human Services
6011 Executive Boulevard, Suite 325
Rockville, Maryland 20852
United States of America

Facsimile No.

Teleprinter No.

Applicant's Registration No. with Office

State (that is, country) of nationality:
USState (that is, country) of residence:
US

This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

NEEMAN, Ziv
9029 Paddock Lane
Potomac, Maryland 20854
United States of America

This person is:

 applicant only applicant and inventor inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No with Office

State (that is, country) of nationality:
ILState (that is, country) of residence:
US

This person is applicant all designated States all designated States except the United States of America the United States of America only the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on a continuation sheet.

Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

agent

 common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Telephone No.
(612) 371-5311

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Agent's Registration No. with Office
36,848

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Continuation of Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTORS

If none of the following sub-boxes is used, this sheet is not to be included in the request.

Name and address WOOD, Bradford J. 8209 Gainsborough Potomac, Maryland 20854 United States of America	(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is: <input type="checkbox"/> applicant only <input checked="" type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)
		Applicant's registration No. with Office

State (that is, country) of nationality: US	State (that is, country) of residence: US	
This person is applicant for the purposes of: all designated States	<input type="checkbox"/> all designated States except the United States of America <input checked="" type="checkbox"/> the United States of America	<input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
Name and address (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
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State (that is, country) of nationality:	State (that is, country) of residence:	
This person is applicant for the purposes of: all designated States	<input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America	<input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
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Name and address (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)	This person is: <input type="checkbox"/> applicant only <input type="checkbox"/> applicant and inventor <input type="checkbox"/> inventor only (If this check-box is marked, do not fill in below.)	
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State (that is, country) of nationality:	State (that is, country) of residence:	
This person is applicant for the purposes of: all designated States	<input type="checkbox"/> all designated States except the United States of America <input type="checkbox"/> the United States of America	<input type="checkbox"/> the United States of America only <input type="checkbox"/> the States indicated in the Supplemental Box
<input type="checkbox"/>	Further applicants and/or (further) inventors are indicated on another continuation sheet.	

Box No. V DESIGNATIONS					
<p>The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.</p> <p>However,</p> <p><input type="checkbox"/> DE Germany is not designated for any kind of national protection</p> <p><input type="checkbox"/> KR Republic of Korea is not designated for any kind of national protection</p> <p><input type="checkbox"/> RU Russian Federation is not designated for any kind of national protection</p> <p><i>(The check-boxes above may be used to exclude (irrevocably) the designations concerned in order to avoid the ceasing of the effect, under the national law, of an earlier national application from which the priority is claimed. See the Notes to Box No. V as to the consequences of such national law provisions in these and certain of States.)</i></p>					
Box No. VI PRIORITY CLAIM					
Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:			
		national application: country or Member of WTO	regional application: * regional Office	international application: receiving Office	
item (1) 09 February 2004 09.02.2004	60/543,766	US			
item (2)					
item (3)					
<p><input type="checkbox"/> Further priority claims are indicated in the Supplemental Box.</p> <p>The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (<i>only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office</i>) identified above as:</p> <p><input checked="" type="checkbox"/> all items <input type="checkbox"/> item (1) <input type="checkbox"/> item (2) <input type="checkbox"/> item (3) <input type="checkbox"/> other, see Supplemental Box</p>					
<p>* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)).</p>					
Box No. VII INTERNATIONAL SEARCHING AUTHORITY					
<p>Choice of International Searching Authority (ISA) (If two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):</p> <p>ISA / EP</p> <p>Request to use results of earlier search; reference to that search (if an earlier search has been carried out by or requested from the International Searching Authority):</p> <p>Date (day/month/year): Number: Country (or regional Office):</p>					
Box No. VIII DECLARATIONS					
<p>The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark applicable check-boxes below and indicate in the right column the number of each type of declaration):</p> <p><input type="checkbox"/> Box No. VIII (i) Declaration as to identity of the inventor : <input type="checkbox"/> Box No. VIII (ii) Declaration as to the applicant's entitlement, as to the international filing date, to apply for and be granted a patent : <input type="checkbox"/> Box No. VIII (iii) Declaration as to the applicant's entitlement, as to the international filing date, to claim the priority of the earlier application : <input type="checkbox"/> Box No. VIII (iv) Declaration of inventorship (only for the purposes of the designations of the United States of America) : <input type="checkbox"/> Box No. VIII (v) Declaration as to non-prejudicial disclosures or exceptions to lack of novelty :</p>			Number of declarations		
Form PCT/RO/101 (last sheet) (January 2004)					See Notes to the request form